Rehabilitation of lexical retrieval in aphasia: Evidence from semantic complexity

Swathi Kiran Boston University

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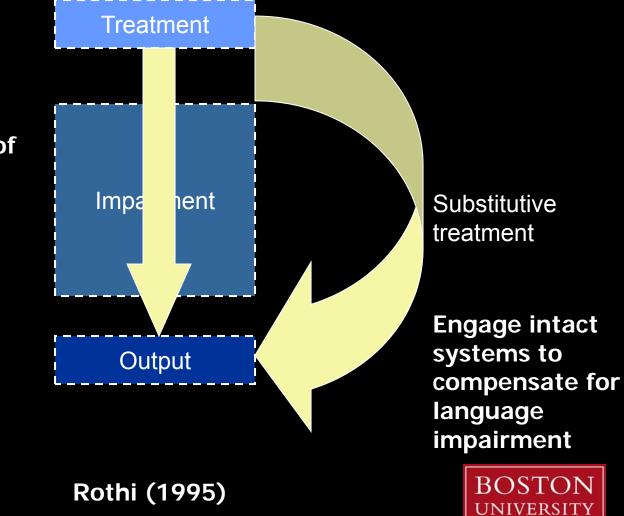


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Treatment for lexical retreival deficits

Restitutive Reactivate or relearn aspects of language





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- Start with objects and provide tactile cues
 – start with repetition and fade repetition cues
- Semantic map for each item
 - Pre-set attributes, function, color, category, location,
- Semantic map for a specific category- have them name and generate
- Minimal pair contrast
- Rhyme judgment/processing
- Neologisms- work towards awareness
- Give them functional cues or assist with a gesture
- Use written naming as a self cue
- Ask them to visualize the target-
- Give them carrier phrases to choose
- Drawing the target word

- Categorization
- Semantic feature discrimination
- Generate features for superordinate category/example
- Category generation-describe category boundaries
- Synonyms and antonyms
- Connect semantic features to Phon Representation
- Phonemic Cueing
- Self Cueing
- Memorizing spelling of words
- Generate the initial grapheme of target
- Specific category features, separate out trained and untrained
- Have them write the target and read
 what they have written
- Rely on pictures
- Naming to definition task
- Verbal analogies





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Why is this distinction important?

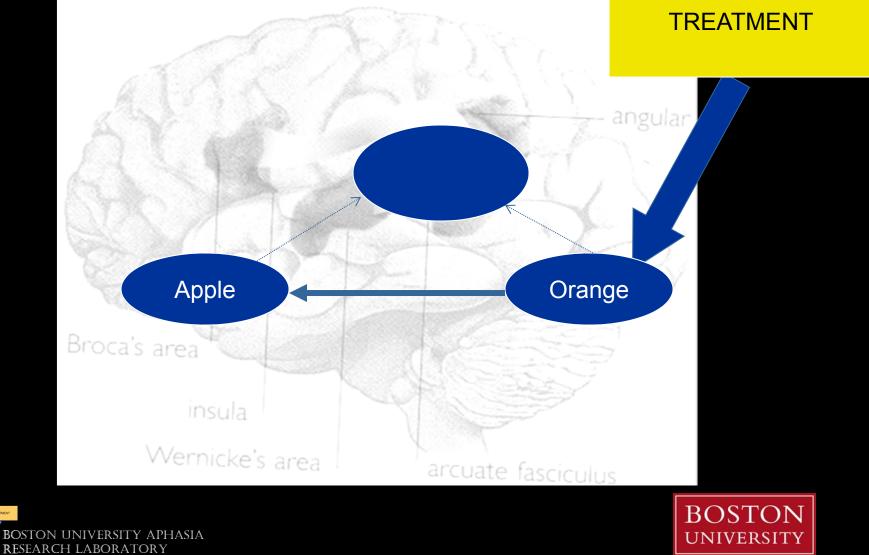
Generalization to untrained items/contexts

- Long term maintenance of treatment effects
- Comparative effectiveness of treatment approaches

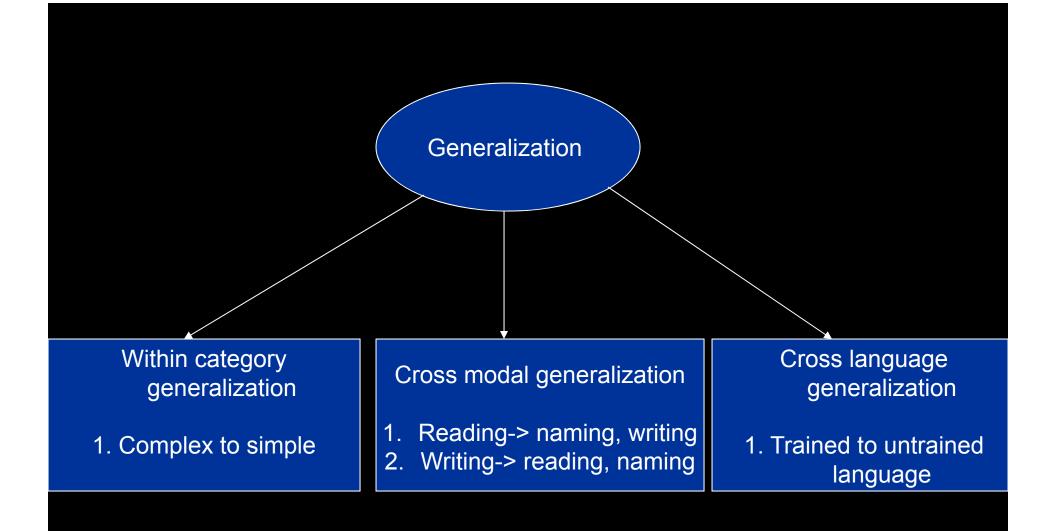




What is generalization??

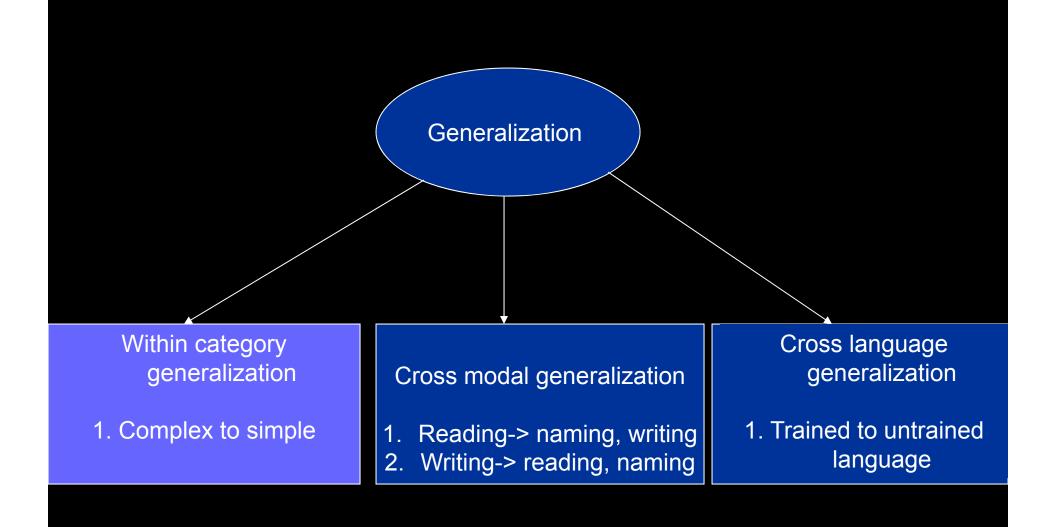


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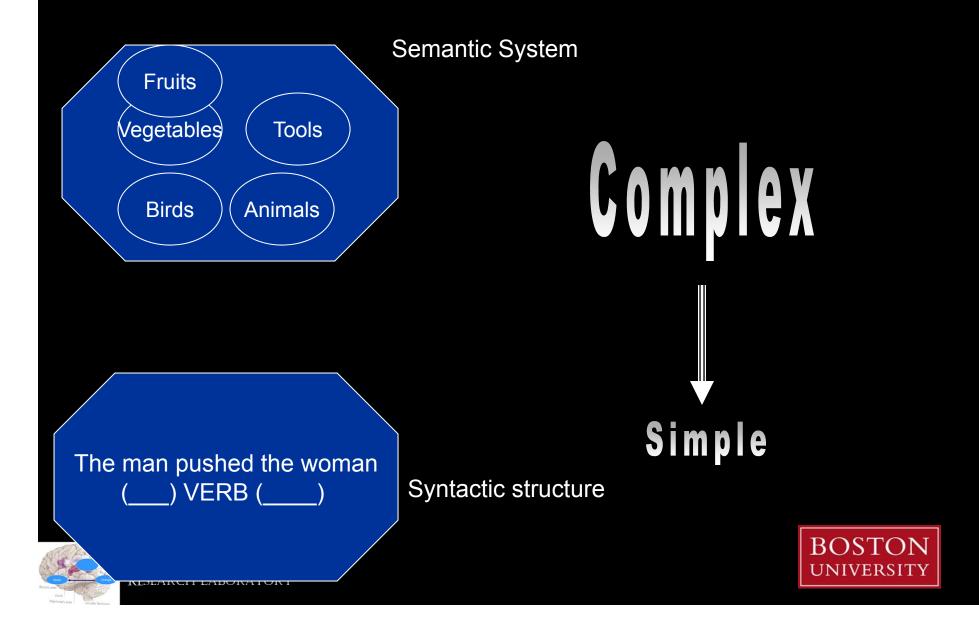








Generalization based on complexity



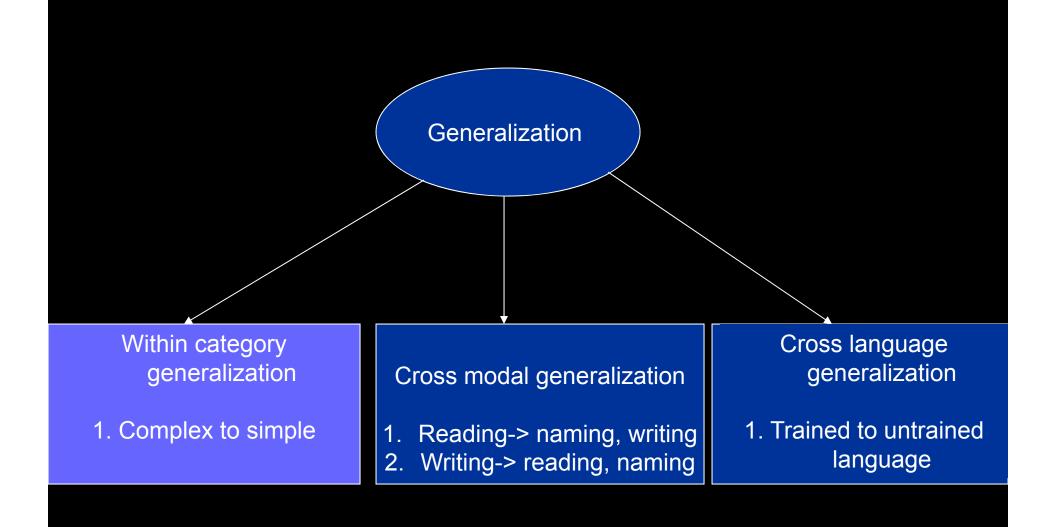
Complexity in Sentence structure

- Thompson et al., (1993).
 - − WHO \rightarrow WhaT
- Thompson et al., (1996).
 - WHO <-> WHAT
 - WHERE <-> WHEN
- Thompson et al., (1997)
 - Object clefts -> who questions
 - It was the artist who the thief chased
 - Who did the thief chase?
 - Passives -> subject raising
 - The thief was chased by the artist
 - The thief seems to have been chased by the artist
- Thompson, Shapiro, Kiran & Sobecks (2003):
- Object relative sentence -> Object clefts, WHO questions
 - The man saw the artist who the thief chased
 - It was the artist who the thief chased
 - Who did the thief chase?



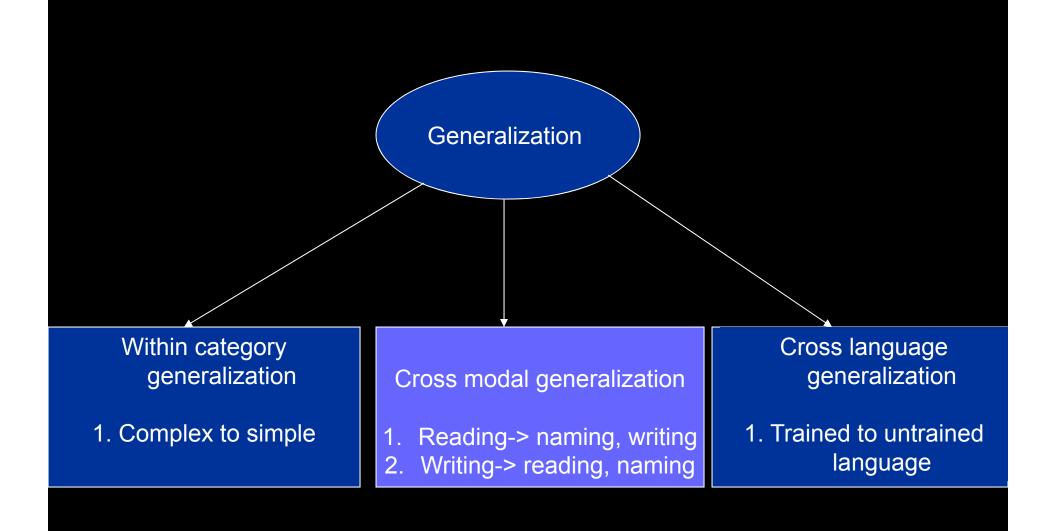
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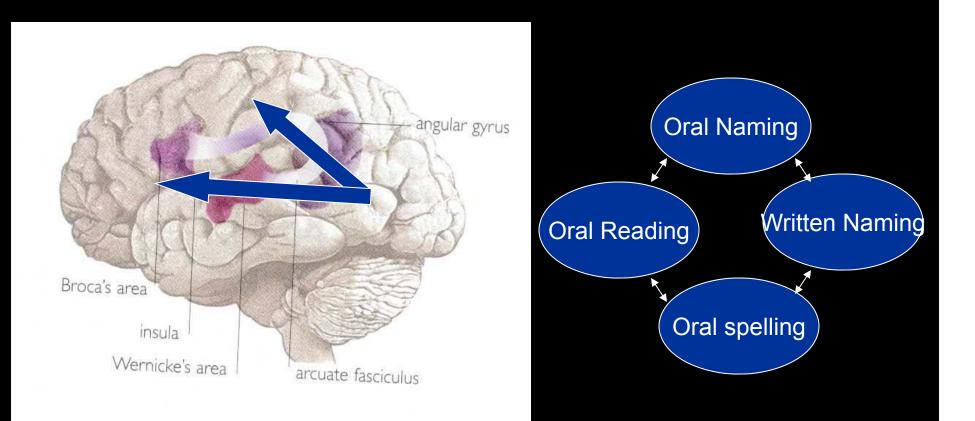




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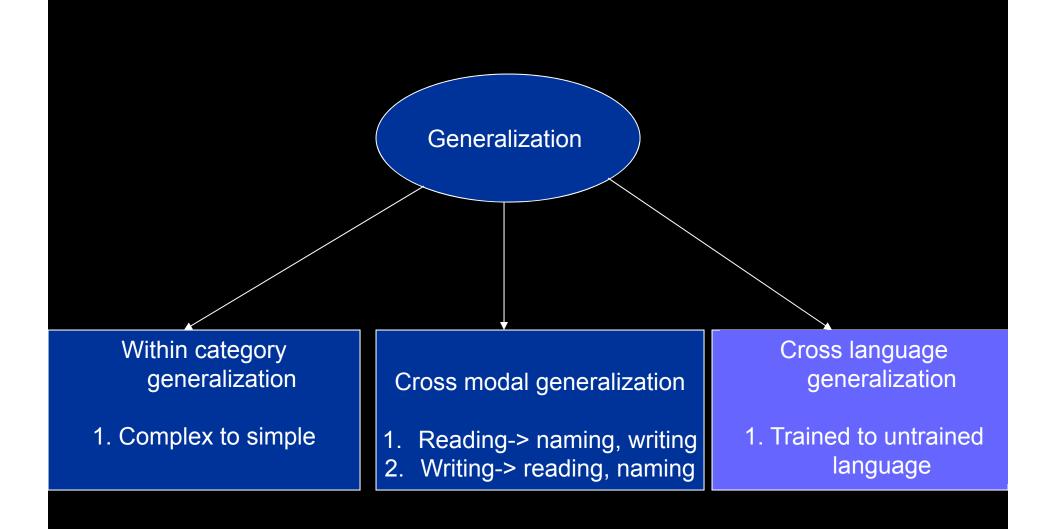
Cross modal generalization





BOSTON UNIVERSITY APHASIA Research laboratory Kiran, Thompson, Hashimoto, 2001; Kiran, 2005; Kiran & Viswanathan, 2008



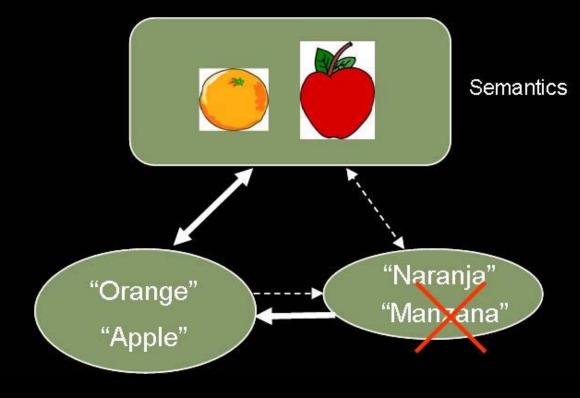






Cross language generalization

Spanish (non-dominant language) treatment





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Generalization within category The effect of exemplar typicality



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Representation of typicality

In normal individuals

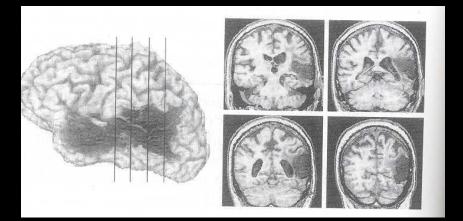
- 1. Some examples are consistently rated more typical of the category than others (Rosch, 1975; Uyeda & Mandler, 1981)
- 2. Typical examples are produced more often to a category name (e.g., Hampton, 1995)
- 3. Typical examples are verified faster than atypical examples (Hampton, 1979, 1993; Rips et al., 1973; Rosch, 1975; Smith et al., 1974)





In Aphasia

 Patients with posterior aphasia present with difficulty at category boundaries and at activating the category prototype (Grober et al., 1980, Grossman, 1981)





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Typicality effect in normal individuals and in patients with aphasia

Evidence for the typicality effect

Category verification: "is robin a bird"?

Feature verification: "Does this bird fly?

Oral Naming: What kind of bird is this?

Treatment for naming deficits

Kiran & Thompson, 2003b; Kiran, Ntorou, & Eubank, 2007; Sebastian & Kiran (submitted)

Kiran & Allison (submitted)

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Kiran & Thompson (2003a); Kiran, (under revision) Kiran & Johnson, (submitted)

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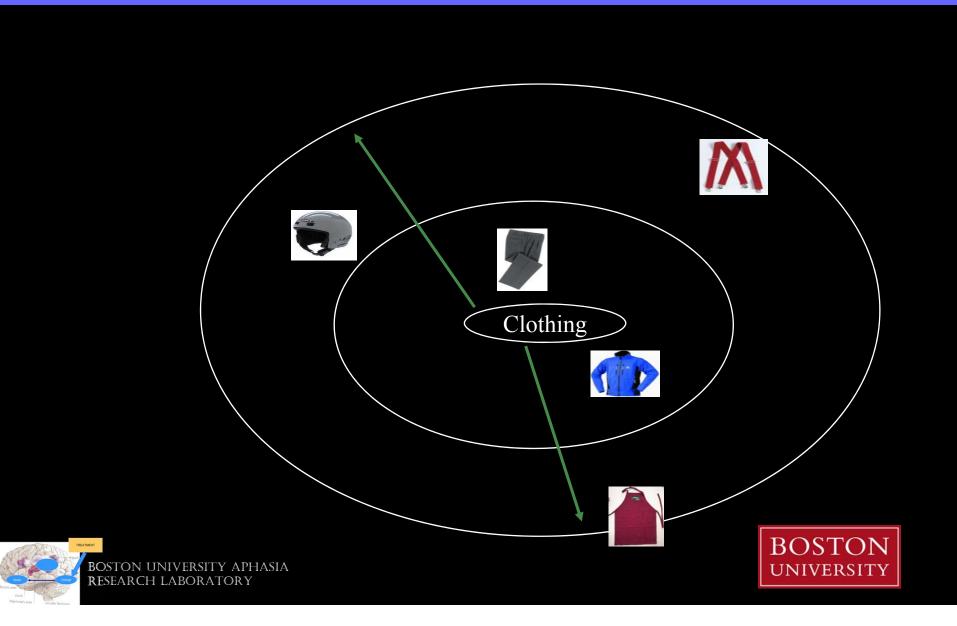
Assumption 1

Atypical examples represented further from the center in space Measured by longer times for atypical examples compared to typical

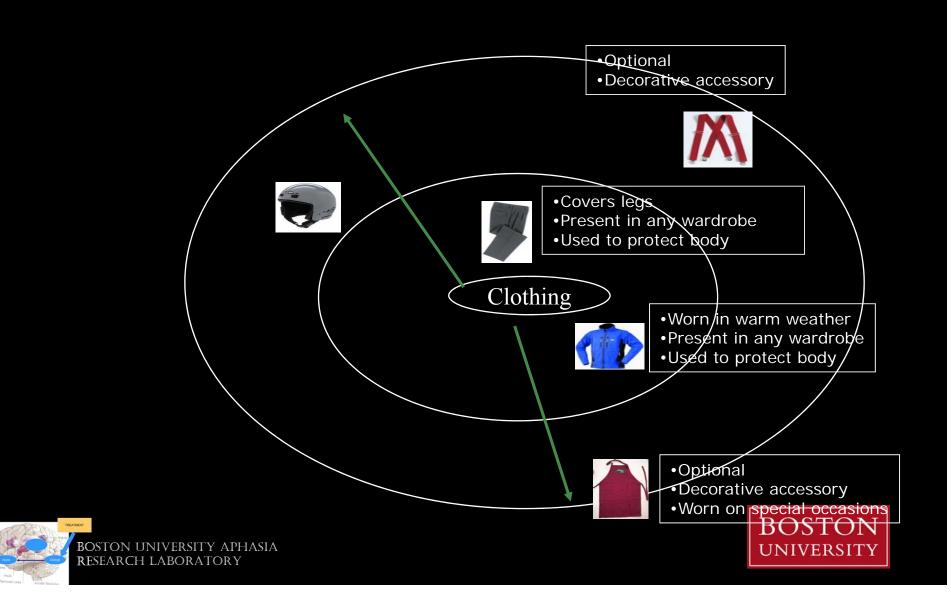




Animate categories



Inanimate categories



Assumption 2:

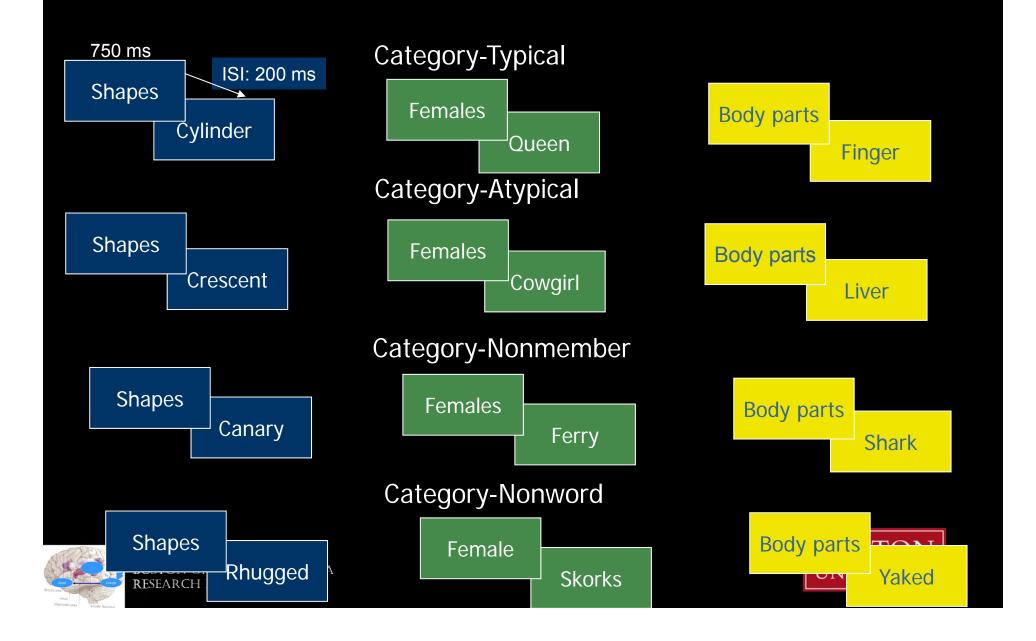
The nature and extent of typicality varies across different categories

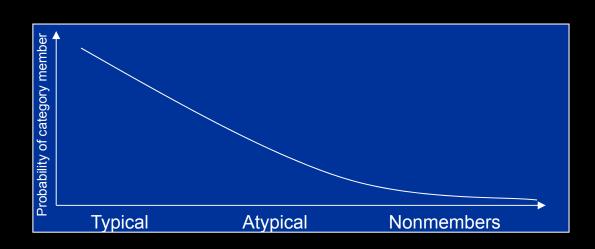


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Category verification task

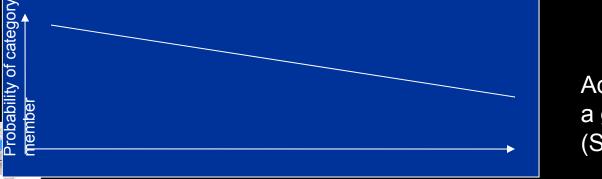




Living categories: Birds (Kiran & Thompson, 2003) Nonliving categories: Clothing (Kiran, Ntourou, & Eubank, 2007)



Well defined categories: Odd Numbers (Kiran, Johnson & Bassetto, 2006)



Ad hoc categories: Things at a garage sale (Sebastian & Kiran E 2004)

Interim Summary

- Typicality effects in normal individuals replicate existing work
- Patients with aphasia also sensitive to typicality effects
 - Except well defined categories
- The nature of typicality in aphasia appears to depend upon whether patients present with co-existing semantic impairments





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Treatment for naming deficits

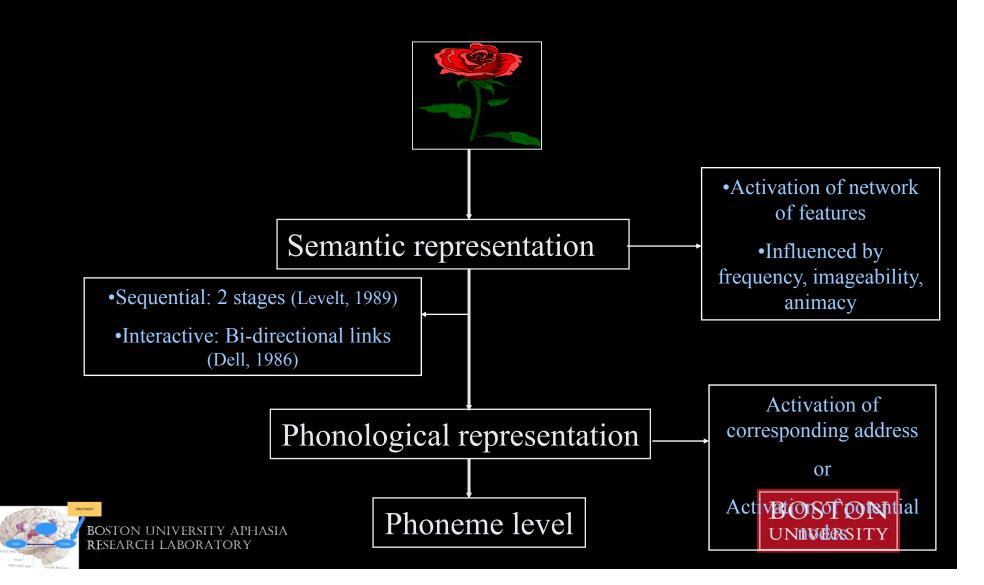
Kiran & Thompson (2003b) Kiran, Ntorou, & Eubank (2007) Sebastian & Kiran (submitted)

Kiran & Allison (submitted)

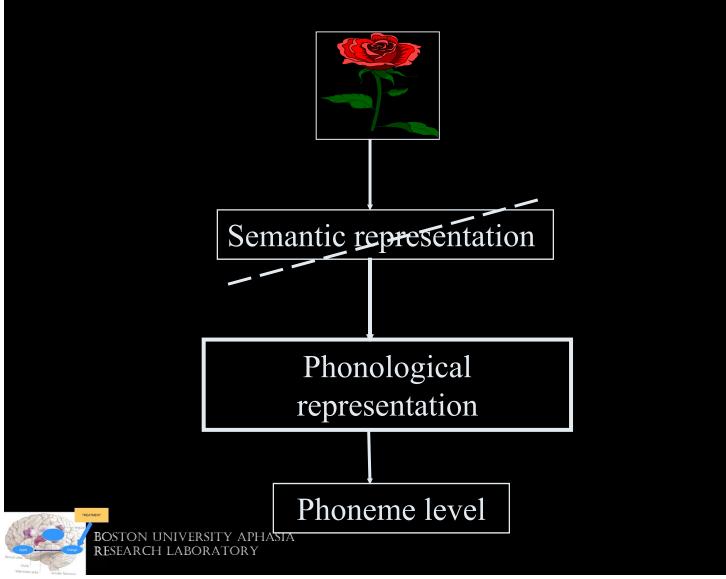
Kiran & Allison (submitted)

Kiran & Thompson (2003a); Kiran, (2008) Kiran & Johnson, (2008); Kiran et al., (in preperation) UNIVERSITY

Framework for lexical access

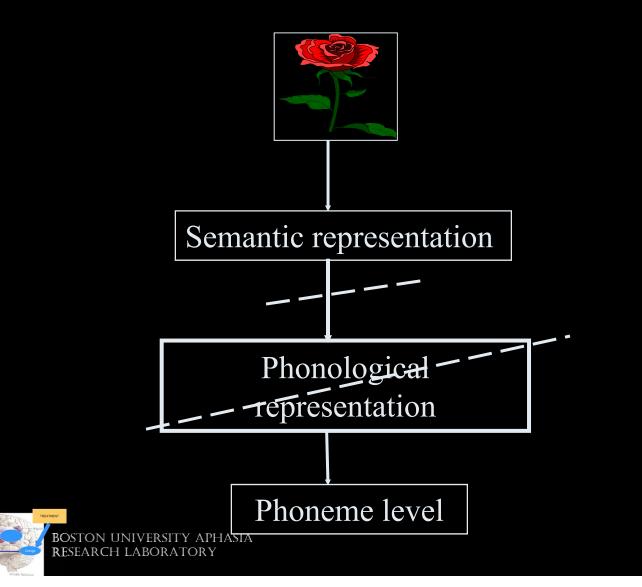


Treatment for naming deficits



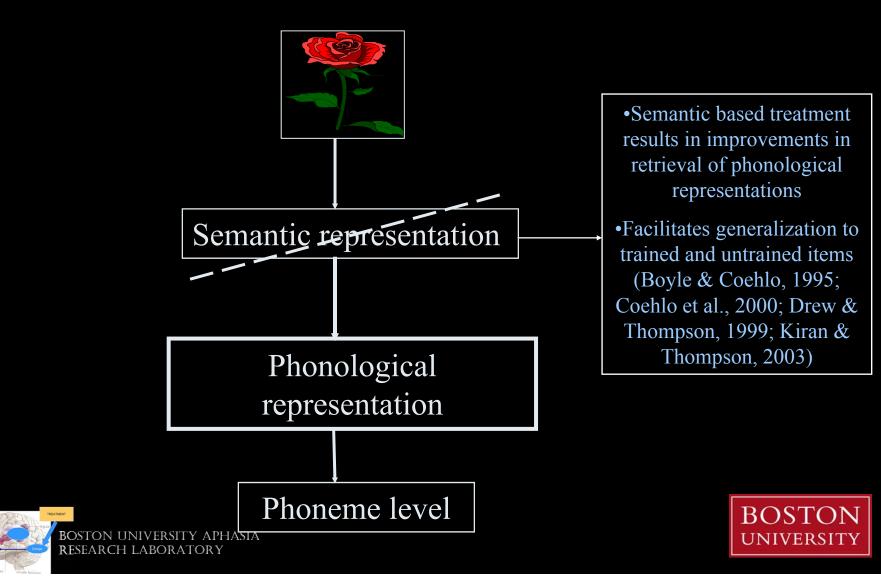


Treatment for naming deficits

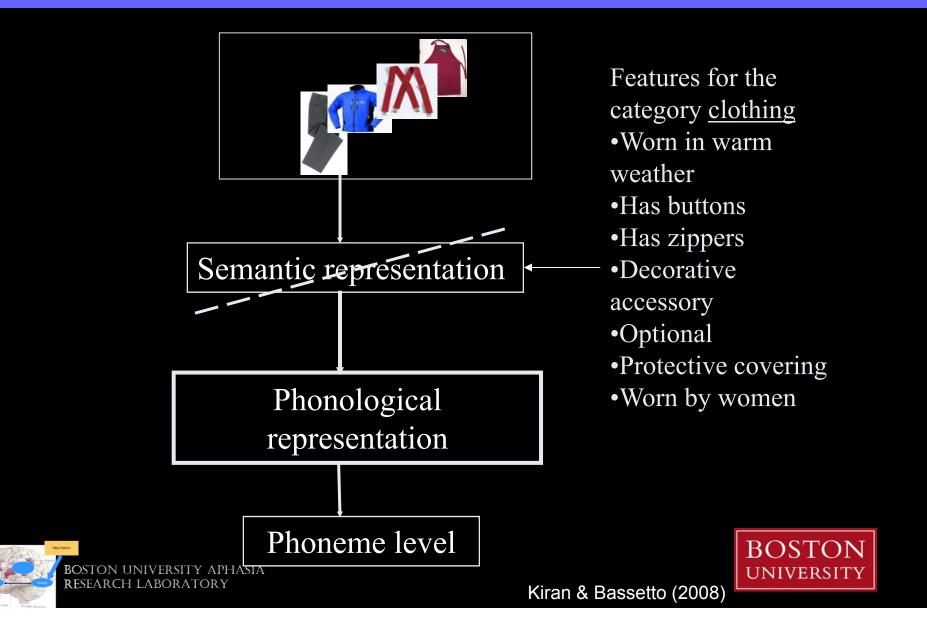


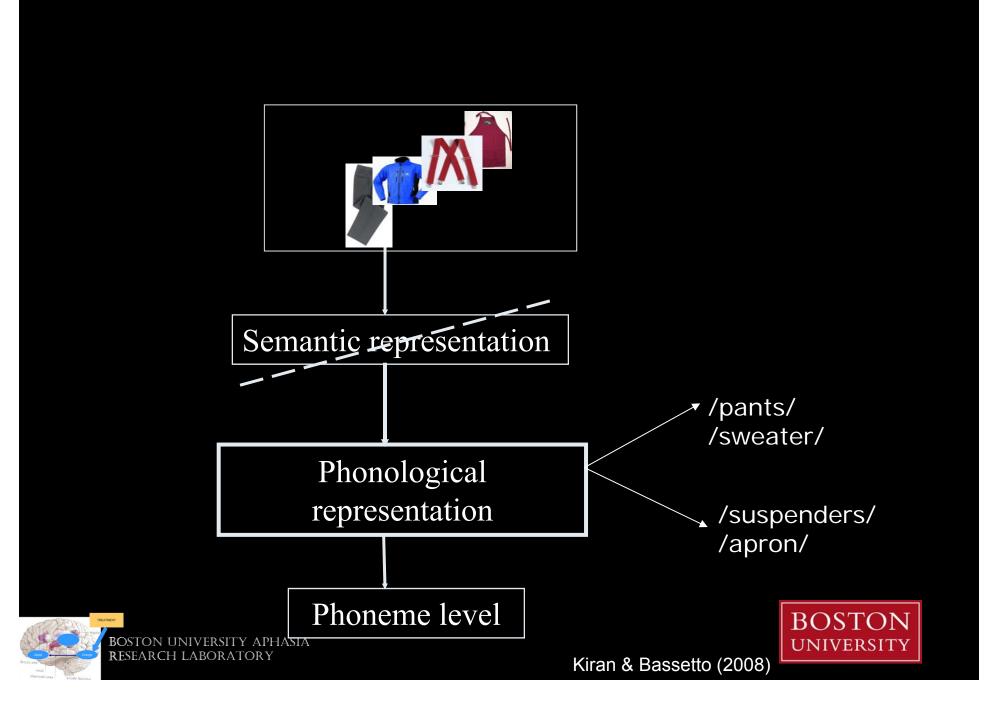


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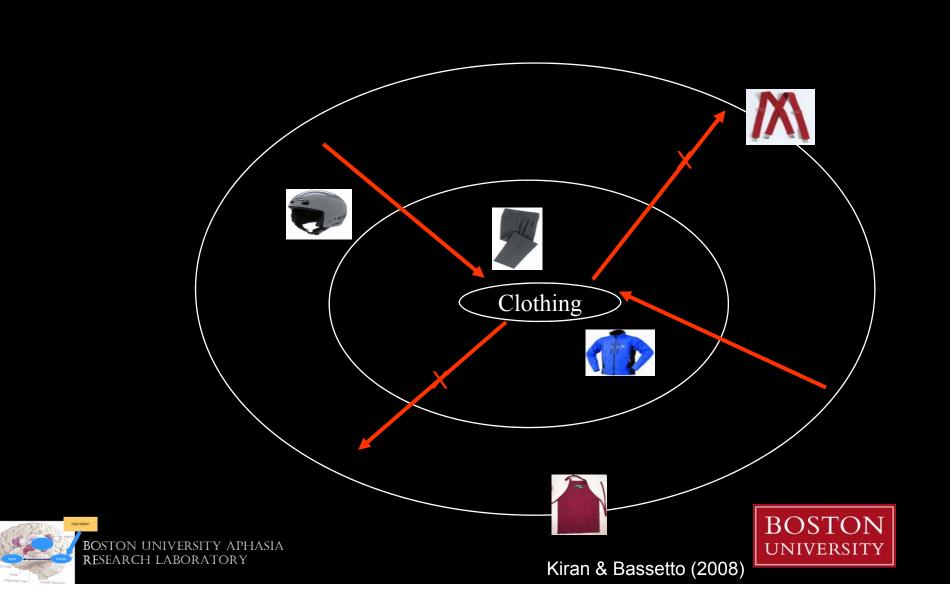


Framework for treatment

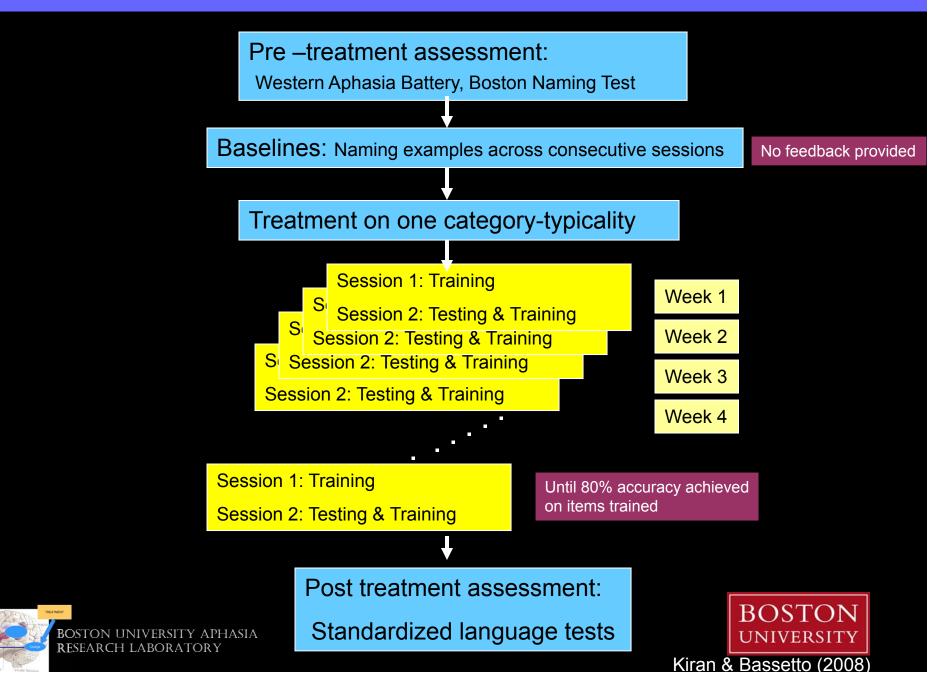




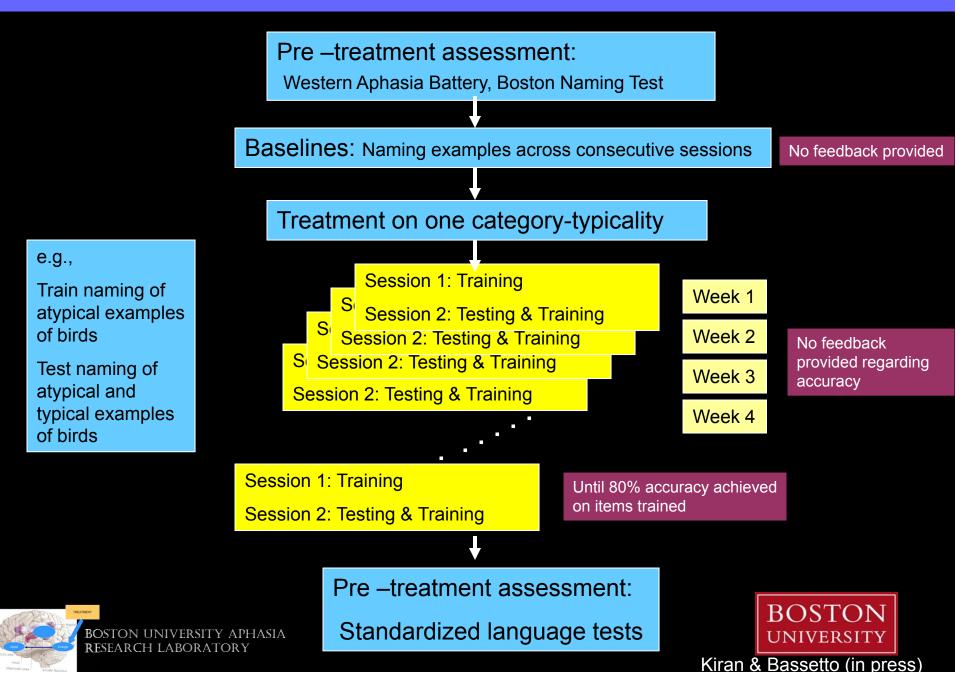
Selective generalization patterns



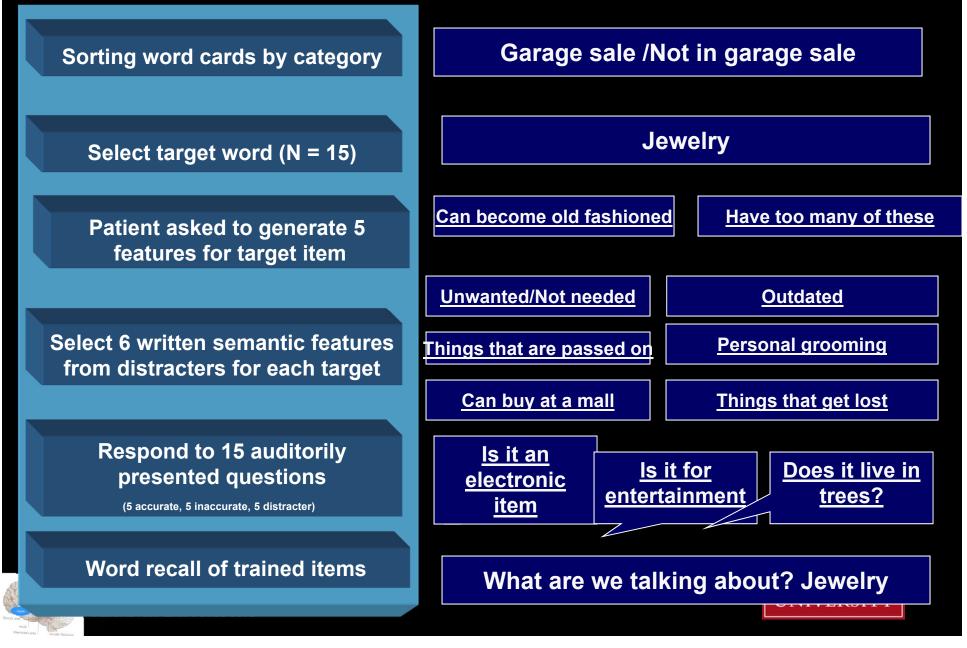
Schedule of treatment for each participant



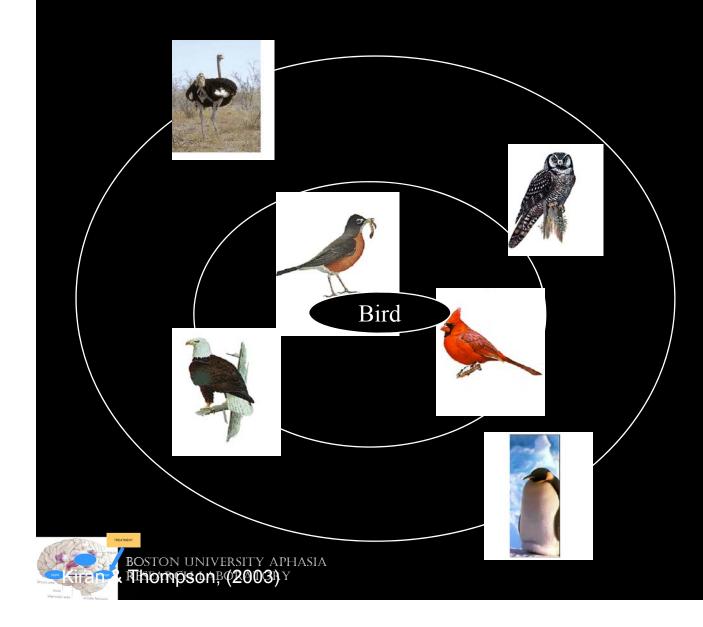
Schedule of treatment for each participant



Treatment Protocol



Animate categories



Features for the category <u>birds</u>:

•wings

•flies

•two legs

•lays eggs

•feathers

•builds nest

•sings

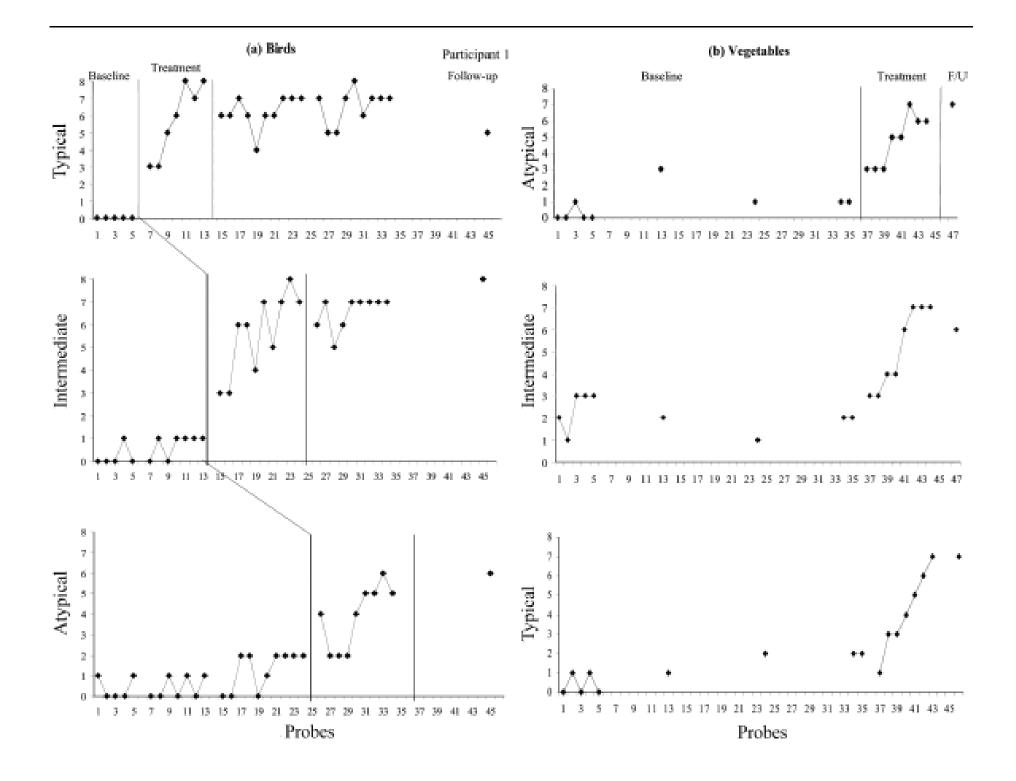
•feathers

•beak

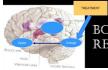
•nocturnal

- •eats insects
- •eats fish
- •claws
- •webbed feet





Participant	Pre tx WAB AQ	Time post onset CVA (months)	Category Trained	Generalization trends
Animate categories (K	iran & Thor	mpson, 2003a	a)	
P1	43.4	99	1. Birds	Typical ≠› Atypical
			2. Vegetables	Atypical => Typical
P2	50.9	13	1. Birds	Atypical => Typical
			2. Vegetables	Atypical => Typical
P2	70	9	1. Vegetables	Typical ≠› Atypical
P4	46.4	14	1. Vegetables	Atypical => Typical
			2. Birds	Atypical => Typical





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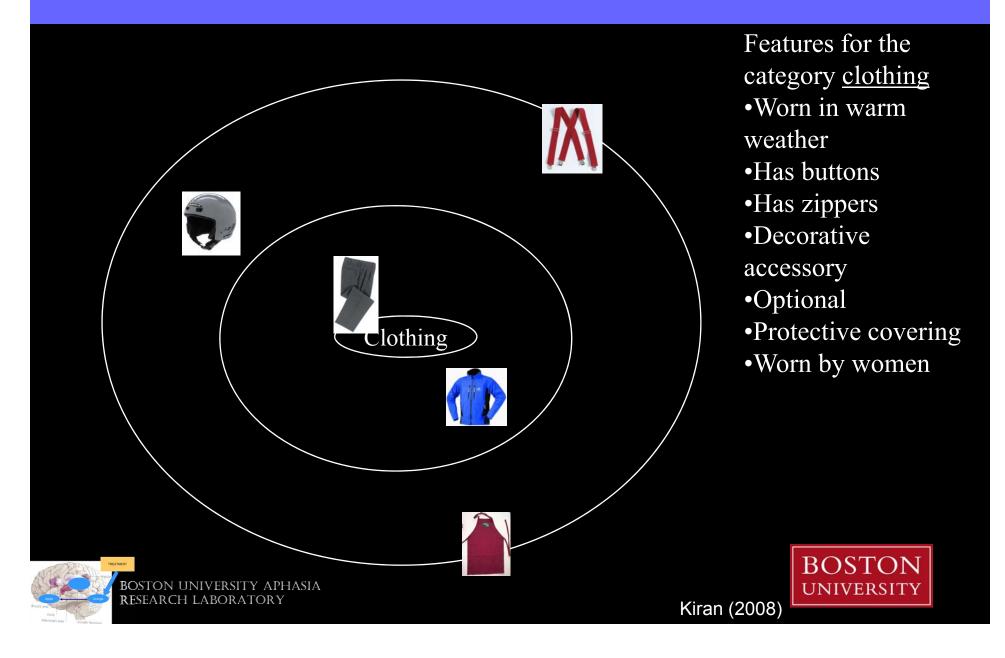


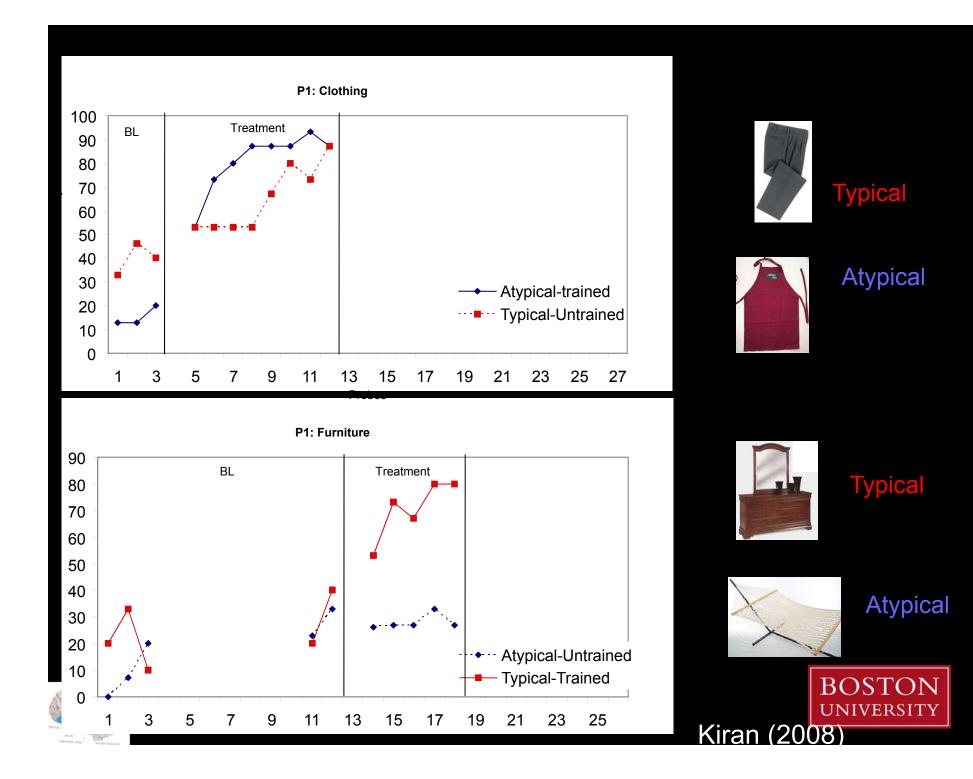
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Clothing/Furniture





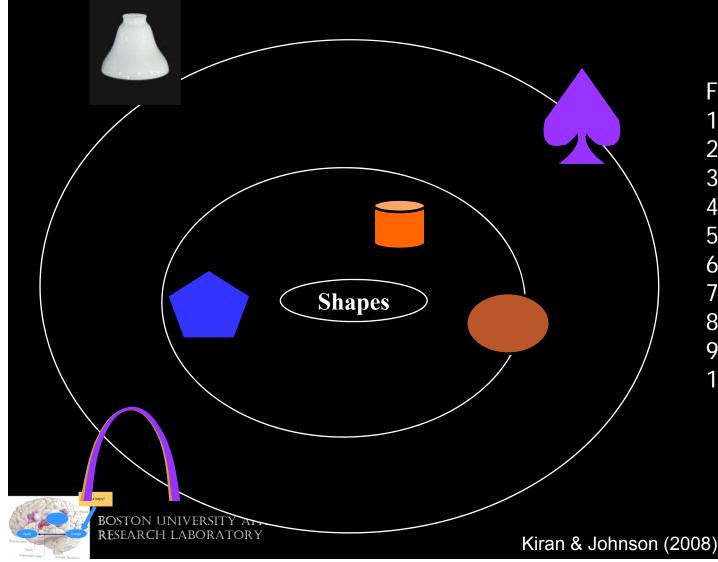
Participant	Pre tx WAB AQ	Time post onset CVA (months)	Category Trained	Gene	ralization trends
Inanimate categories ('Kiran, subi	nitted)			
P1	56.7	9	1. Clothing	Atypic	al => Typical
			2. Furniture	Typica	al ≠› Atypical
P2	72.5	7	1. Furniture	Туріса	al ≠› Atypical
P3	62.2	7	1. Furniture	Atypic	al ≠› Typical
			2. Clothing	Туріса	al ≠› Atypical
P4	46.4	9	1. Clothing	Typica	al ≠› Atypical
			2. Furniture	Atypic	cal => Typical
P5	37	8	1. Furniture	Atypic	al => Typical
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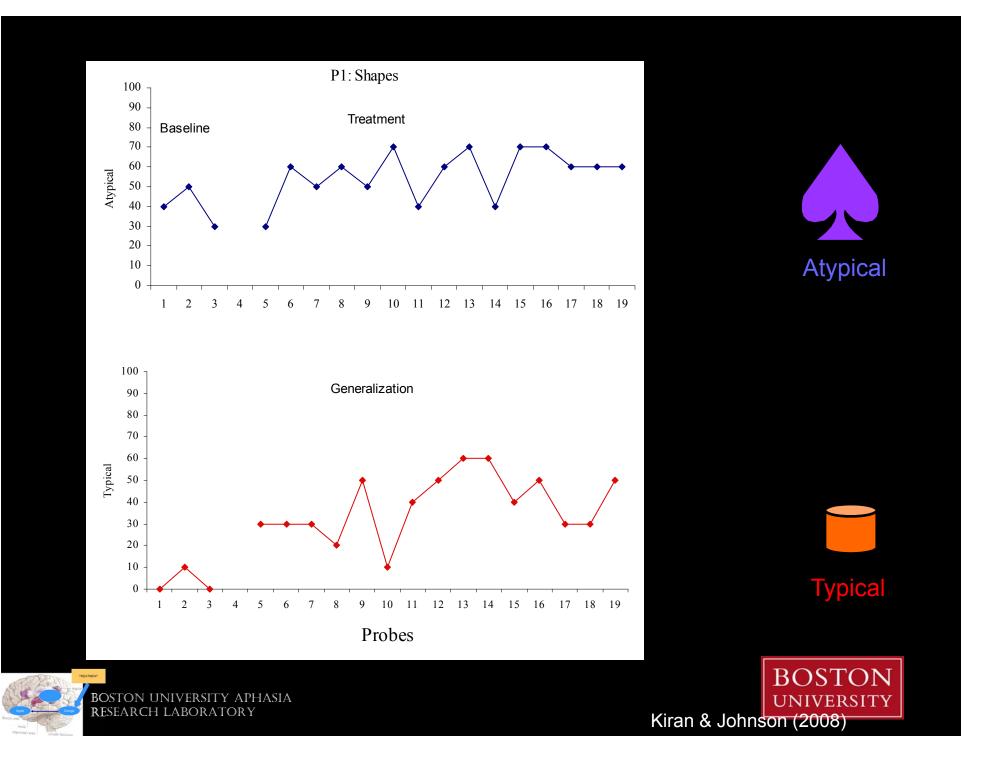
Well defined categories have a clear definition and clear boundaries



Features for Shapes

- 1. Is a closed figure
- 2. Has sides
- 3. It is round
- 4. Is 3 dimensional
- 5. Has angles
- 6. Has lines
- 7. Has curves
- 8. Has diameter
- 9. Can bisect
- 10. acute angles

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Participant	Pre tx WAB AQ	Time post onset CVA (months)	Category Trained	Generalization trends
Well define categories	(Kiran & Jo	onnson, subi	nitted)	
P1	82.5	11	1. Shapes	Atypical => Typical
P2	84.3	7	1. Shapes	Typical ≠› Atypical
P3	87.3	36	1. Shapes	Atypical => Typical



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Kiran & Johnson (2008)

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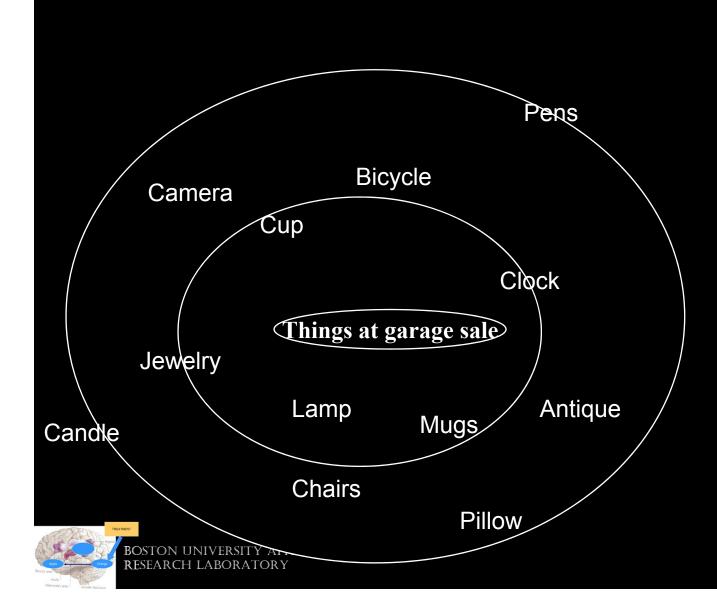


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Kiran & Johnson (2008)

Ad hoc categories

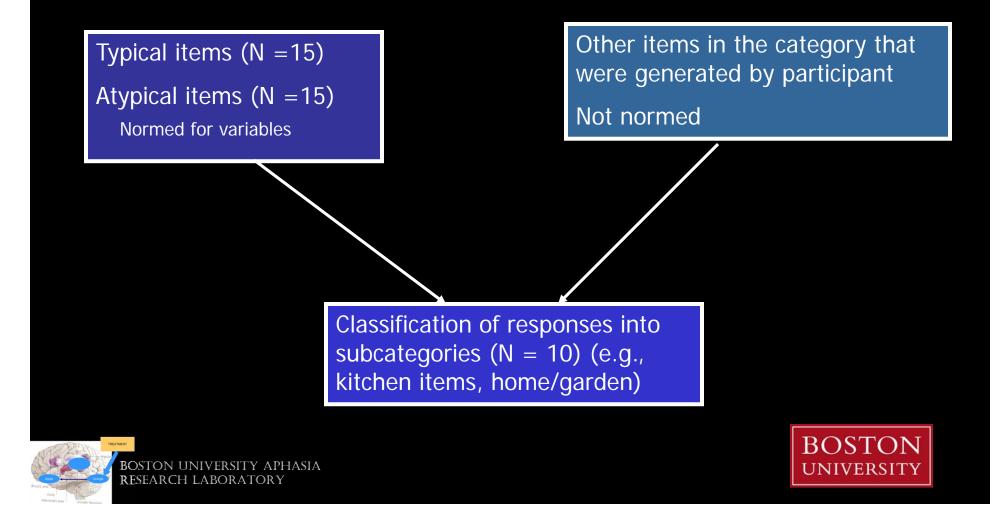


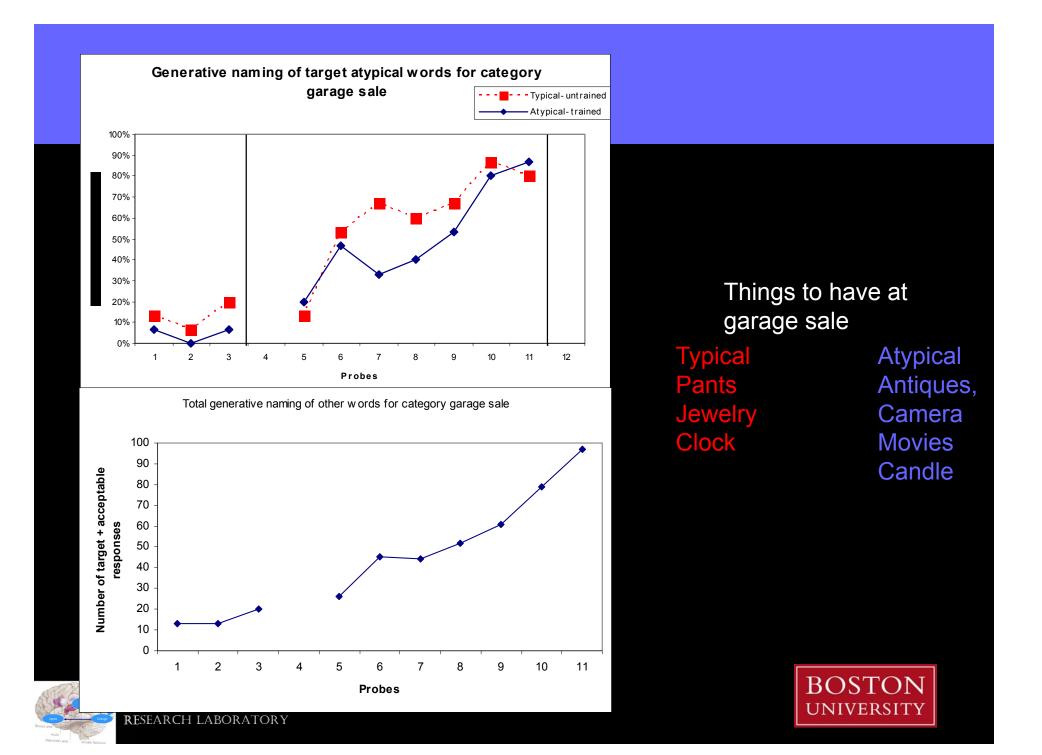
- Entertainment
- Items for travel
- Household items
- Memorabilia
- Unwanted/not needed
- For kids
- Things with newer formats
- Things that get replaced
- Things for reading



Dependent variable in baseline and treatment probes: Generative naming of category items

"Please name as many items that you could have in a garage sale"





Summary: Treatment effects

Particip ant	Age	Pre tx WAB AQ	Time post onset CVA (months)	Category Trained	Generalization trends
P1	76	79	30	1. Things at garage sale	Atypical => Typical
P2	39	82	6	1. Things to take camping	Atypical => Typical
				2. Things at garage sale	Typical => Atypical
P3	76	84.3	108	1. Things at garage sale	Atypical => Typical
P4	69	72.1	10	1. Things to take camping	* Typical <i>⇒</i> > Atypical
				2. Things at garage sale	* Atypical => Typical
P5	84	70.9	9	1. Things to take camping	* Typical ≠› Atypical
P6	64	84.8	96	1. Things at garage sale	Atypical => Typical



BOSTON JUDIERSITY APHAGIAIEVE TX criterion of 80% accuracy across 2 sessionsersity

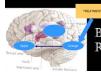
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BOSTO		hot achieve	tx criterion	of 80% accuracy across	BOSTON #INDERSITY APHACHIEVE tx criterion of 80% accuracy across 2 sessionsersity							

Summary: Treatment effects

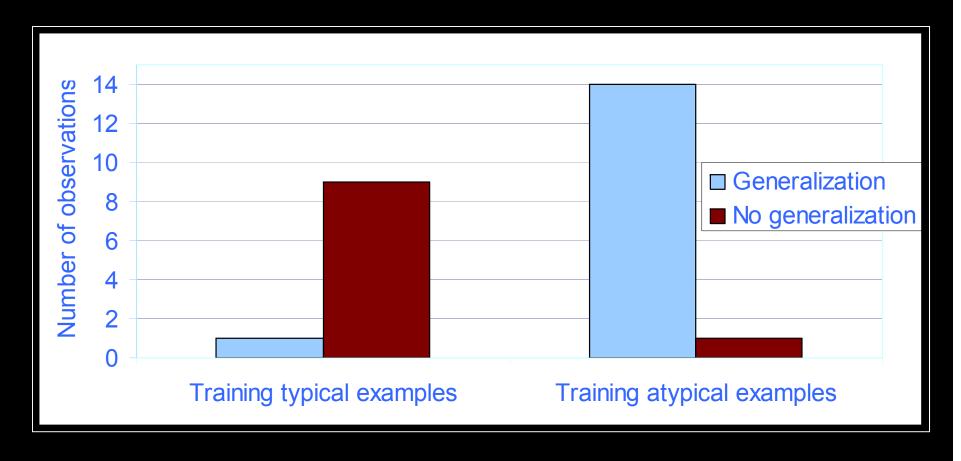
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BOSTON JUDIERSITY APHAGIAIEVE tx criterion of 80% accuracy across 2 sessionsersity

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Summary of treatment studies

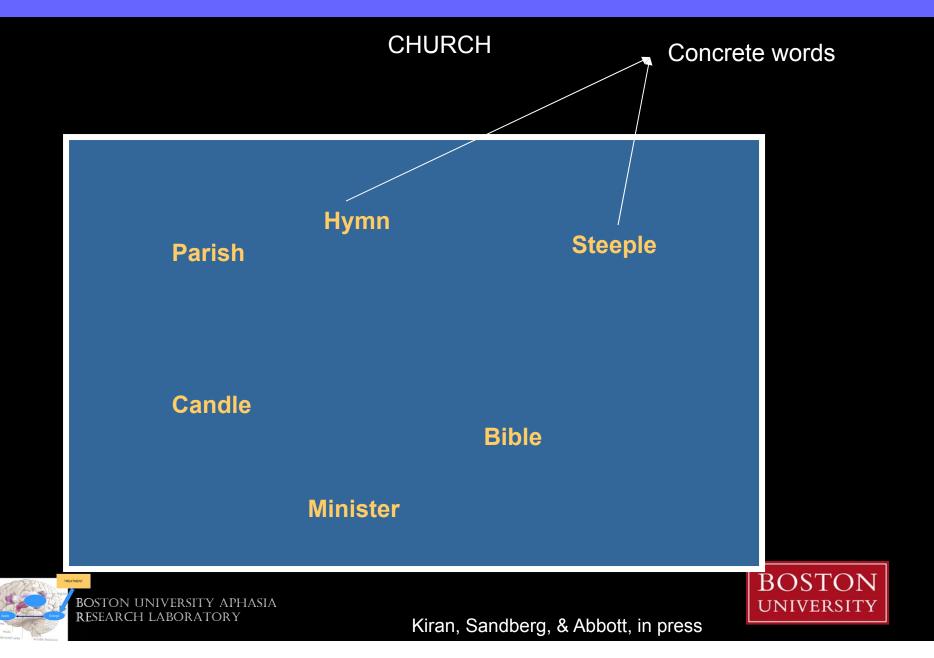




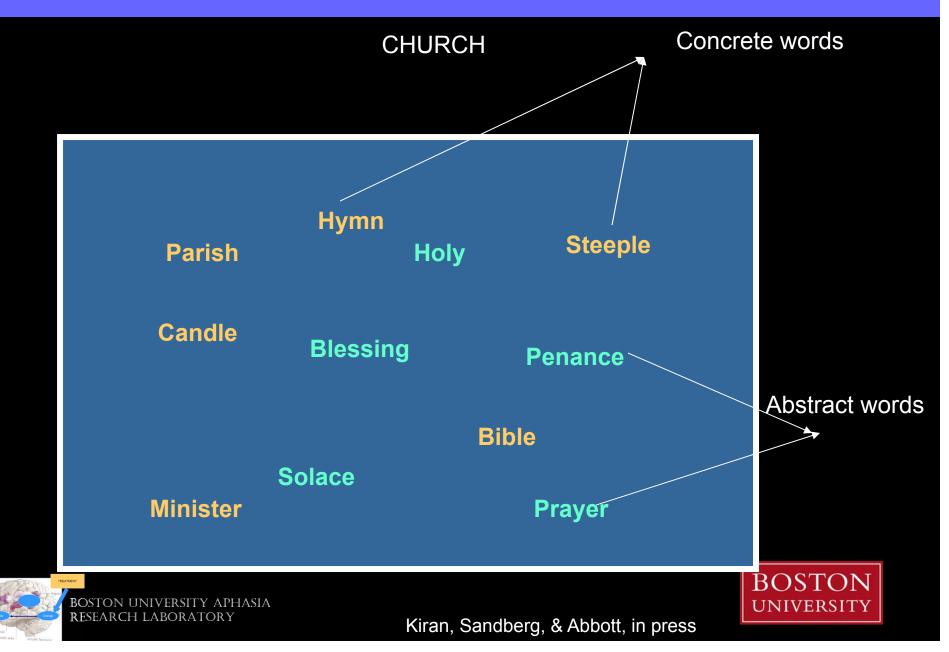
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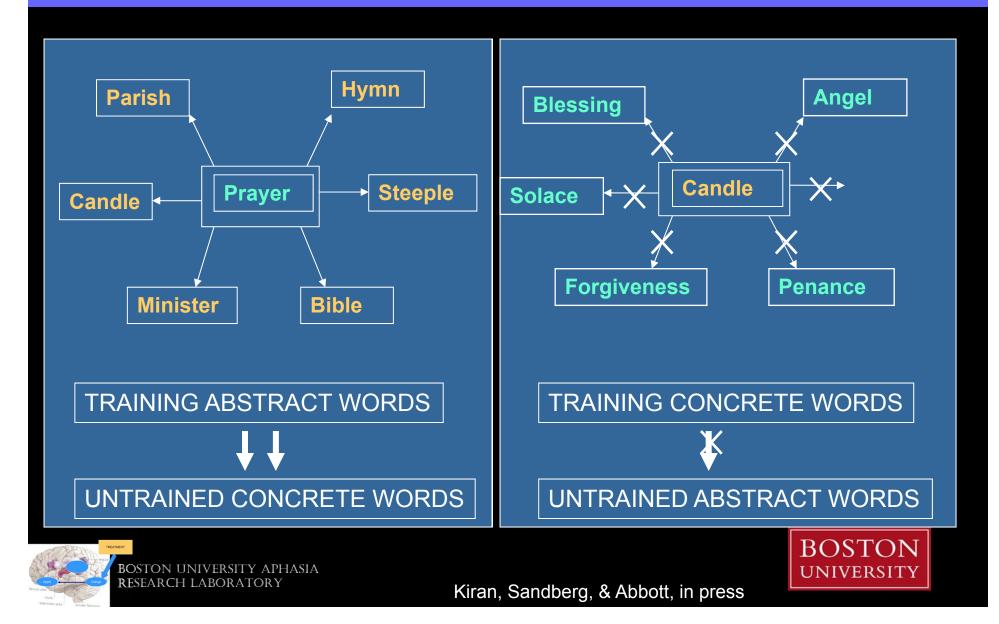
Theoretical Assumption



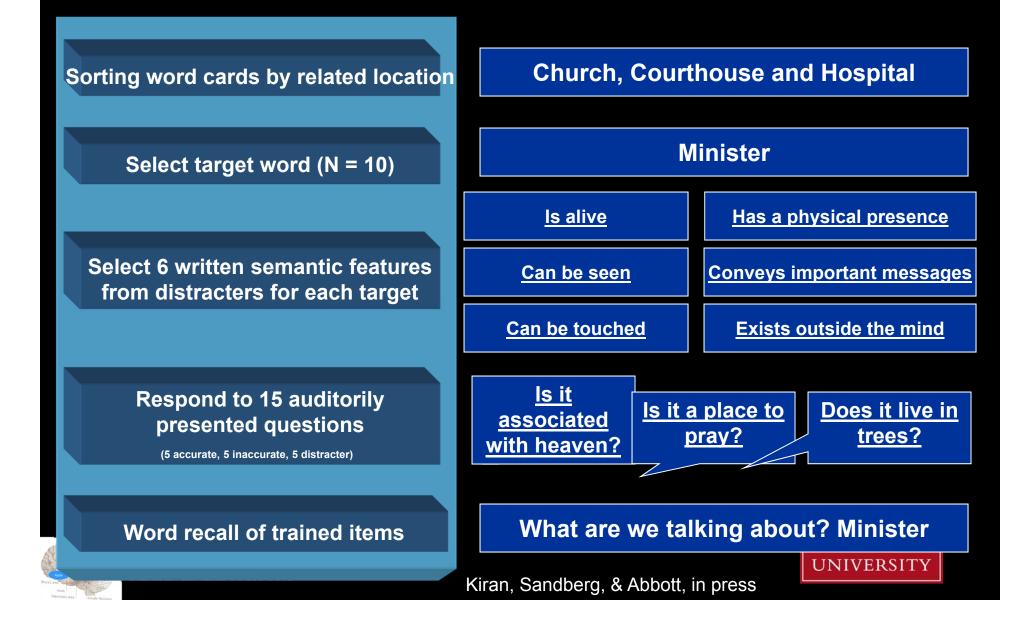
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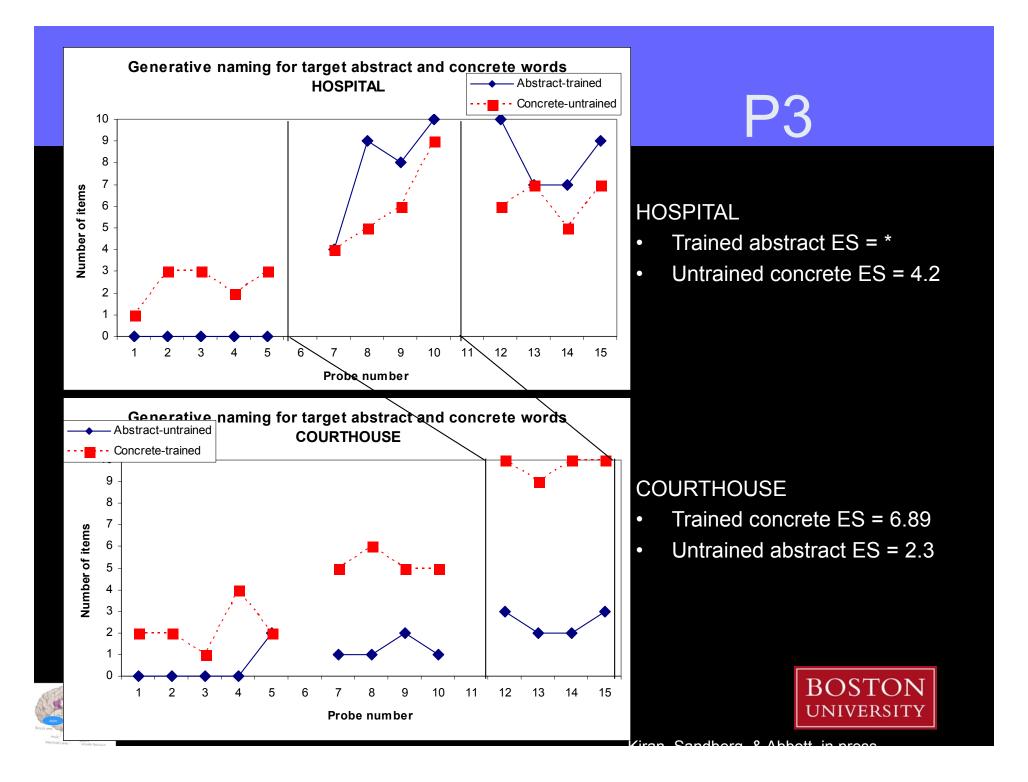


Hypothesis and Predictions



Treatment Protocol





Summary of results

Ps	Category trained	Typicality trained	Generalization patterns observed	
P1	1. Church	Abstract	Abstract ≠> Concrete	No learning, no generalization
	2. Hospital	Concrete	Concrete ≠> Abstract	No learning, no generalization
P2	1. Church	Abstract	Abstract => Concrete	Generalization
	2. No treatment			
P3	1. Hospital	Abstract	Abstract => Concrete	Generalization
	2. Courthouse	Concrete	Concrete ≠> Abstract	No generalization
P4	1. Church	Concrete	Concrete ≠> Abstract	No generalization
	2. Hospital	Abstract		





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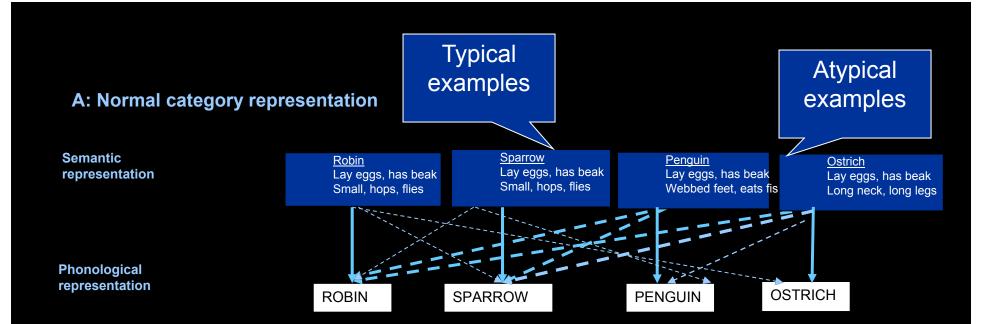


Summary of results

Ps	Category trained	Typicality trained	Generalization patterns observed	
P1	1. Church	Abstract	Abstract ≠> Concrete	No learning, no generalization
	2. Hospital	Concrete	Concrete ≠> Abstract	No learning, no generalization
P2	1. Church	Abstract	Abstract => Concrete	Generalization
	2. No treatment			
P3	1. Hospital	Abstract	Abstract => Concrete	Generalization
	2. Courthouse	Concrete	Concrete ≠> Abstract	No generalization
P4	1. Church	Concrete	Concrete ≠> Abstract	No generalization
	2. Hospital	Abstract		

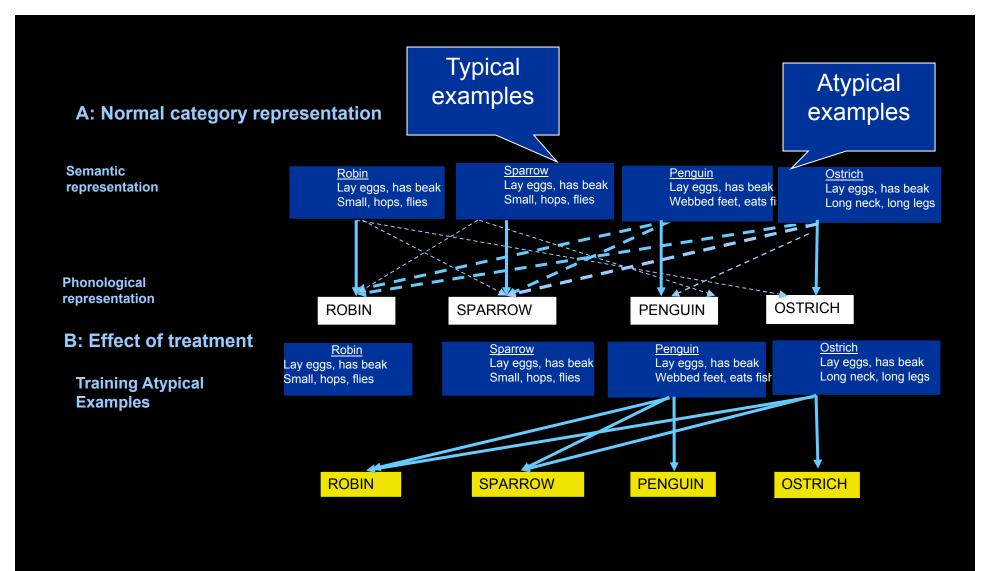






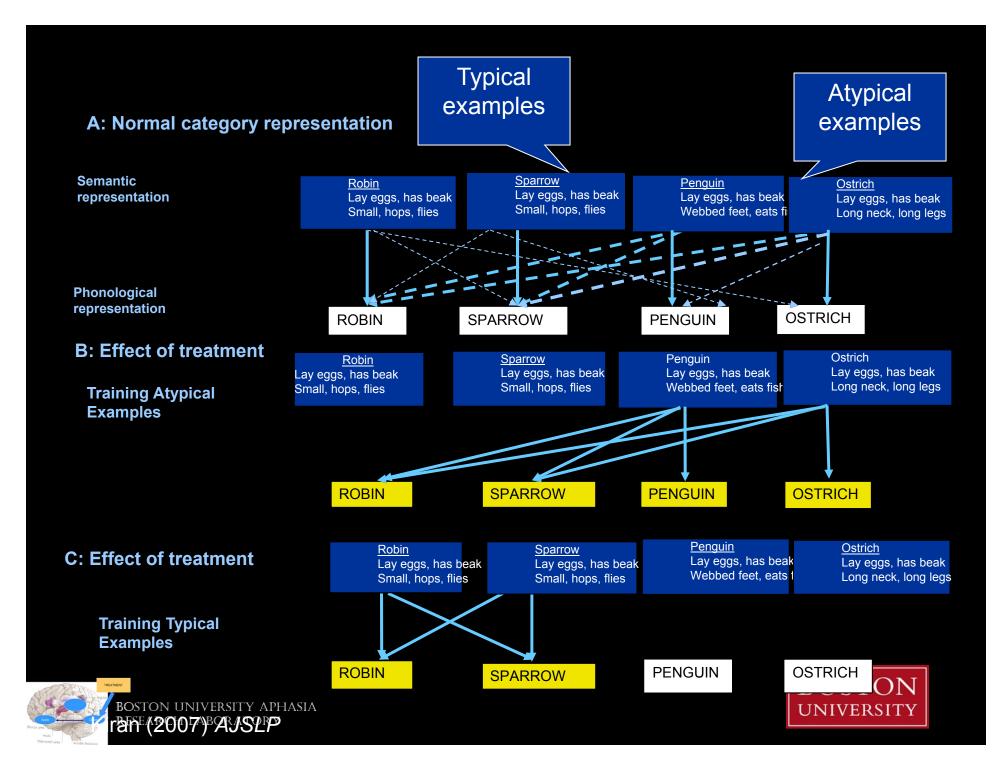












- Training atypical examples may be more efficient than typical examples to facilitate within category generalization
- Patients also show consistent improvements on language measures
- Are behavioral changes associated with functional changes in the brain?

 What are regions that can support behavioral language recovery after treatment?



